AMENDMENT TRANSMITTAL LETTER						Docket No. 09669/056001	
Application No.		, ming bato		Examiner	Art Uni		
10/528,306-Conf. #6389		March 17, 2005		T. W. Kim		2876	
olicant(s): Ben	oît Thevenot						
ention: HYBRII	D CARD						
	TC	THE COMMI	SSIONER FO	R PATI	ENTS		
ansmitted here					cation.		
ne fee has beer	calculated an	d is transmitte	d as shown b	elow.	A JAN		
			S AS AMENI	DED			
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present		Rate		
Total Claims	9	- 20 =	0	х	50.00	0.00	
Independent Claims	1	- 3 =	0	х	210.00	0.00	
Multiple Depend	l Claires (ab		a 🗆				
		count No.	ı		omall Entity		
	he amount of \$			the filing	g fee is enclo	sed.	
Payment by	credit card. F	orm PTO-2038	is attached.				
X The Director	r is hereby auti d below. A du					50-0591	
	ny overpayme						
x Charge		•	on processing	fees req	uired under 37	CFR 1.16 and 1.17	
Jonathan P. O. Attorney/Agent		S SCHERE	<u> </u>	ı	Dated: No	ovember 12, 2007	
OSHA · LIANG	LLP y St., Suite 280	20					